

DECLARATION AND POWER OF ATTORNEY FOR UTILITY PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below, next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and System for Assimilating Data from Disparate, Ancillary Systems Onto an Enterprise System

the specification of which

☒ is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I do not know and do not believe that the same was ever known or used in the United States of America before my invention thereof, or patented or described in any printed publication in any country before my invention thereof of more than one year prior to this application, and said invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed

(number) (country) (date filed)

yes no

(number) (country) (date filed)

yes no

09822013 1033101

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

(Application Number(s))

(Filing Date mm/dd/yy)

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) or Section 365(c) of any PCT international application designating the United States of America, listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Serial No.)

(Filing date)

(Status)

I hereby appoint Rudolph J. Buchel, Reg. No. 43,448, my attorney and my patent agent with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

Send correspondence to:
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Direct Telephone Calls To:
(214) 969-2990

I hereby declare that all statements made herein of my knowledge are true and that all statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of Sole or First Inventor:
P.O./Residence Address:
Citizenship:

Kristopher P. Braud
10530 Tanwood Avenue, Baton Rouge, LA 70809
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Signature:

Kristopher P. Braud

Date:

3/26/2001

Full name of Additional Joint Inventor, if any:
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Signature:

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Date:

3/26/2001

Patent Docket No.: 017017-620002

Full name of Additional Joint Inventor, if any:
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Citizenship:

Signature: _____

Danny J. Ragan

Date: _____

3/26/2001

Full name of Additional Joint Inventor, if any:
P.O./Residence Address:
Citizenship:

Signature: _____

Date: _____

Full name of Additional Joint Inventor, if any:
P.O./Residence Address:
Citizenship:

Signature: _____

Date: _____

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Citizenship:

Signature: _____

Date: _____

Full name of Additional Joint Inventor, if any:
P.O./Residence Address:
Citizenship:

Signature: _____

Date: _____

Full name of Additional Joint Inventor, if any:
P.O./Residence Address:
Citizenship:

Signature: _____

Date: _____

FILED IN 032266

Applicant or Patentee: Braud, et al.

Serial or Patent No.: Not Assigned

Filed or Issued: Herewith

Title: METHOD AND SYSTEM FOR ASSIMILATING DATA FROM DISPARATE
ANCILLARY SYSTEMS ONTO AN ENTERPRISE SYSTEM

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(F) AND 1.27(C)) -- SMALL BUSINESS CONCERN**

I hereby declare that I am

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of
the concern identified below:

NAME OF CONCERN: PROVIDER HEALTHNET SERVICES, INC.

ADDRESS OF CONCERN: 3434 North Boulevard
Baton Rouge, LA 70806

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that the rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in

- ☒ the specification filed herewith with titled as listed above.
☐ the application identified above.
☐ the patent identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention must file separate verified statements averring to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

FULL NAME: _____

ADDRESS: _____

☐ individual ☐ small business concern ☐ nonprofit organization

NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities (37 CFR 1.27).

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: Richard K. Kneipper

TITLE OF PERSON IF OTHER THAN OWNER: Chief Administrative Officer

ADDRESS OF PERSON SIGNING: 15851 Dallas Parkway, Suite 925

Addison, Texas 75001

SIGNATURE: _____

DATE: 7/23/01